NOTE: Please inform the Office of the Registrar if you change your address.

INSTRUCTIONS: Completed application is to be brought to the Birks Student Service Centre (SGW – LB 185). The fee is $40 payable by money order or debit card (Interac).

COURSE NAME  NUMBER  SESSION  SECTION  INSTRUCTOR

Be sure to indicate what it is (examination, term paper, etc.) you wish re-evaluated and what informal attempts toward re-evaluation have been made. Give SPECIFIC reasons why you are seeking re-evaluation. Before completing this section, it is recommended that you read the section(s) in the undergraduate or graduate calendar entitled “Academic Re-evaluation Procedures”. The grounds for a re-evaluation request are restricted to claims that: a miscalculation of the grade occurred; or the evaluation of the work was demonstrably unfair.

Student’s Signature ____________________________ Date ____________________

OFFICE USE ONLY

PAYMENT METHOD  DATE:  AMOUNT:  INITIALS:

☐ D/C  ☐ MO1